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| **2023 PETUNIA PRIMARY REGISTRATION FORM****LEARNER INFORMATION** |
| **Learner CEMIS number** | **Date of birth** |
|  **Surname** |  | **Name**  |  |
| **Learner's ID number** |  | **Gender** |  **Male** |  | **Female** |  |
|  **Population group** | **Black / African** |  | **Coloured** |  | **Indian / Asian** |  | **White** |  |  |
| **SA Citizen**  |  **YES** |  | **NO** |  | **Undocumented SA / Foreign learner** | **YES** |  |  **NO** |  |
| **If “No”, did you apply for birth certificate** | **Yes** |  | **No** |  | **If “Yes” what is the date applied for birth certificate** |  |
| **Please indicate if the learner has a****sibling at the school. (1)** | **YES** |  | **NO** |  | Grade |  |
| **Please indicate if the learner has a****sibling at the school. (2)** | **YES** |  | **NO** |  | Grade |  |
| **Please indicate if the learner has a****sibling at the school. (3)** | **YES** |  | **NO** |  | Grade |  |

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| **Medical Information** |
| Allergies |  |
| Family Doctor |  | Contact number |  | Road to Health Card shown | Yes |  | No |  |
| Medical Aid |  | Medical Aid Number |  | **Main member** |  |
| Any indication of problems with regards to: |
| Child’s growth progress | Yes |  | No |  | Prenatal/Postnatal information | Yes |  | No |  |
| Hospital admissions | Yes |  | No |  |  | Any chronic condition | Yes |  | No |  |
| Visual / hearing / weight / speech / physical / locomotor screening results |

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| **Parent / Legal Guardian Information** |
| **Parent / Legal Guardian type (Please tick)** | Biological | Adoptive | Legal Guardian | Step | Other |
| **Title: (Please tick)** | Mr | Miss | Mrs | Ms | Prof. | Dr | Rev. |
| **Surname** |  | **Name** |  |
| **Date of birth** |  | **SA Citizen** | **YES** |  | **NO** |  |
| **ID / Passport number** |  | **Gender** | **Male** |  | **Female** |  |
| **If “No”, did you apply for ID document / permit** | **Yes** |  | **No** | **If “Yes” what is the date applied of application** |  |
| **Marital status: (Please tick)** | Married | Single | Widow / Widower | Divorced | Never married |
| **Home Address** |
| **Address type** | **Street** |  | **Flat** |  | **Farm** |  | **Plot** |  |
| **Address no.** |  | **Street name** |  |
| **Suburb** |  | **Town** |  |
| **Contact Information**  |
| **Cell phone no.** |  | **Tel. no. (work** |  |
| **Emergency contact number (1)** |  | **Emergency contact umber**  |  |

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| ***Academic Information*** |
| **Name of last school attended** |  | **Year** |  |
| **Required Grade** |  | Language of Learning and Teaching | English |  | Afrikaans |  |
| **Are you relocating to the Western Cape (WC) from another province?** | **YES** |  | No |  |
| **If yes, write down the name of the province.** |  |
| **Are you relocating to the WC from another country?** | **YES** |  | No |  |
| **If yes, write down the name of the country.** |  |
| **Declaration by legal parent / guardian**  |
| I hereby consent to the rules and ethos of the school and will do everything in my power to instil this in my child.I acknowledge the code of conduct of the school. I will assist the school in the execution of the code of conduct for the full duration of his/her term at the school. I expect the school to execute the code of conduct in all fairness and in accordance with applicable procedures.I will pay the school fees of my child. I was informed that I can apply for exemption of school fees. I will inform the school if my financial position changes and I cannot adhere to my financial obligations. |
| **I**, the undersigned, declare that the above information is correct.Signed by legal parent / guardian **............................... Date 2022 / ......... / ......** |
| **REQUIRED DOCUMENTS SUBMITTED TO THE SCHOOL** |
| **Please check that the following documentation is attached** | **Please tick** |
| 1. Certified copy of Birth certificate (learner) | YES | NO |
| 2. Certified copy of Identity document of parent(s) | YES | NO |
| 3. A study permit issued by the Department of Home Affairs or proof of application (If the learner is a  foreign learner) | YES | NO |
| 4. Copy of immunisation card / Road to Health chart (Primary schools only) | YES | NO |
| 5. Latest official school academic report of the learner | YES | NO |
| 6. Proof of residence (This could be: Rates account / Lease agreement / An affidavit confirming  residence) | YES | NO |
| Checked by (Name and surname):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: 2022 / .......... / ................. |

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| **Parent / Legal Guardian Information** |
| **Parent / Legal Guardian type (Please tick)** | Biological | Adoptive | Legal Guardian | Step | Other |
| **Title: (Please tick)** | Mr | Miss | Mrs | Ms | Prof. | Dr | Rev. |
| **Surname** |  | **Name** |  |
| **Date of birth** |  | **SA Citizen** | **YES** |  | **NO** |  |
| **ID / Passport number** |  | **Gender** | **Male** |  | **Female** |  |
| **If “No”, did you apply for ID document / permit** | **Yes** |  | **No** |  | **If “Yes” what is the date applied of application** |  |
| **Marital status: (Please tick)** | Married | Single | Widow / Widower | Divorced | Never married |
| **Home Address** |
| **Address type** | **Street** |  | **Flat** |  | **Farm** |  | **Plot** |  |
| **Address no.** |  | **Street name** |  |
| **Suburb** |  | **Town** |  |
| **Contact Information**  |
| **Cell phone no.** |  | **Tel. no. (work)** |  |